

Revision: HCFA-PM-91-4 (BPD)
August 1991

OMB No.: 0938-

State/Territory: Pennsylvania

Citation 3.2 Coordination of Medicaid with Medicare and Other Insurance

(a) Premiums

(1) Medicare Part A and Part B

1902(a)(1)(E)
and 1905(p) of
the Act

(i) Qualified Medicare Beneficiaries (QMB)

The Medicaid agency pays Medicare Part A premiums (if applicable) and Part B premiums for individuals in the QMB group defined in Item A.26 of ATTACHMENT 2.2-A, by the following method:

- ☐ Group premium payment arrangement for Part A
- ☒ Buy-In agreement for
- ☒ Part A ☒ Part B
- ☐ Other arrangements described below

TN No. 91-33

Supersedes Approval Date

TN No. 90-24

Effective Date November 1, 1991

HCFA ID: 7982E

Revision: HCFA-PM-91-4 (BPD)
August 1991

OMB No.: 0938-

State/Territory: Pennsylvania

Citation 3.2(a)(1)(i) Qualified Medicare Beneficiaries (cont'd)

- ☐ The Medicaid agency pays premiums, for which the beneficiary would be liable, for enrollment in an HMO participating in Medicare.

1905(s) of the
Act

(ii) Qualified Disabled and Working Individuals

The Medicaid agency pays Medicare Part A premiums, subject to any contribution required as described in ATTACHMENT 4.18-E, for individuals in the QDWI group defined in item A.26 of ATTACHMENT 2.2-A of this plan. Premiums are paid by the following method:

- ☐ Group premium payment arrangement
☒ Other arrangements described below

Manual payment process through the
Department of Public Welfare Comptroller.

TN No. 91-33

Supersedes

TN No. 90-24

Approval Date 9/10/1993

Effective Date November 1, 1991

HCFA ID: 7982E

Revision: HCFA-PM-91-4 QMB:
August 1991

State: Pennsylvania

Citation 3.2(a)(1)(iii) Other Medicaid Recipients

42 CFR X The Medicaid agency pays Medicare Part B premiums to make Medicare Part B coverage available to the following individuals entitled to Part A insurance benefits:

X All individuals who are: a) receiving benefits under titles I, IV-4, X, XIV, or XVI (AABD pr SSI); b) receiving State supplements under title XVI; or c) within a group listed at 42 C.F.R. 431.625(d)(2).

— Except those receiving title II or Railroad Retirement benefits.

— All the above individuals except:

— Medically needy individuals (FFP is not available for this group).

Section 1903(a)
of the Act (2) Other Health insurance

X The Medicaid agency pays premiums for other insurance coverage if cost-effective to maintain a third party resource for Medicaid covered services provided to eligible individuals (except those over 65 years of age or disabled who are entitled to Medicare Part A but not enrolled in Medicare Part B).

Revision: HCFA-PM-93-2 QMB:
March 1993

State: Pennsylvania

<u>Citation</u>	(b) <u>Deductibles/Coinsurance</u>
Section 1902(a)(30), 1902 (n) 1905(a) and 1916 of the Act	(1) Medicare Part A and B Supplement 1 to ATTACHMENT 4.19-B describes the methods and standards for establishing payment rates for services covered under Medicare, and/or the methodology for payment of Medicare deductible and coinsurance amounts, to the extent available for each of the following groups:
Sections 1902 (a)(10)(E) and 1905(p)(3) of the Act	(i) <u>Qualified Medicare Beneficiaries (QMBS)</u> The Medicaid agency pays Medicare Part A and Part B deductible and coinsurance amounts for QMBs (subject to any nominal Medicaid copayment) for all services available under Medicare.
1902(a)(10), 1902(a)(30), and 1905(a) of the Act	(ii) <u>Other Medicaid Recipients</u> The Medicaid agency pays for Medicaid services also covered under Medicare and furnished to recipients entitled to Medicare (subject to any nominal Medicaid copayment). For services furnished to individuals who are described in section 3.2(a)(1)(iii), payment is made as follows:
42 CFR 431.625	For the entire range of services available under Medicare Part B.
	X Only for the amount, duration, and scope of services otherwise available under this plan.
1902(a)(10), 1902(a)(30), 1905(a), and 1905(p) of the Act	(iii) <u>Dual Eligible--QMB plus</u> The Medicaid agency pays Medicare Part A and Part B deductible and coinsurance amounts for all services available under Medicare and pays for all Medicaid services furnished to individuals eligible both as QMBs and categorically or medically needy (subject to any nominal Medicaid copayment).

Revision: HCFA-PM-91-8 (MB)
October 1991

OMB No.:

State/Territory: Pennsylvania

Citation

Condition or Requirement

1906 of the
Act

(c) Premiums, Deductibles, Coinsurance
and Other Cost Sharing Obligations

The Medicaid agency pays all premiums, deductibles, coinsurance and other cost sharing obligations for items and services covered under the State plan (subject to any nominal Medicaid copayment) for eligible individuals in employer-based cost-effective group health plans.

When coverage for eligible family members is not possible unless ineligible family members enroll, the Medicaid agency pays premiums for enrollment of other family members when cost-effective. In addition, the eligible individual is entitled to services covered by the State plan which are not included in the group health plan. Guidelines for determining cost effectiveness are described in section 4.22(h).

1902(a)(10)(F)
of the Act

(d) ☒ The Medicaid agency pays premiums for individuals described in item 19 of Attachment 2.2-A.

TN No. 93-19

Supersedes

TN No. New

Approval Date

DEC 17 1993

Effective Date 07/01/93

HCFA ID: 7983E